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RIRDATASHEET

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APPLICANTS				,				
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This application	TA ************************************							
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ADDRESS 6160 PARKHURST & WEI 1421 PRINCE STRE SUITE 210 ALEXANDRIA, VA 22314-2805								
TITLE Optical disk apparatu	s having compensation for ob	ojective lens	dislocation					
No	FEE FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT				☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other			
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